## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

019970-008

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
			(Column 1)		(Column 2)		1	TYPE		OR	OR SMALL ENTI		
TOTAL CLAIMS			20				•	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* 0			X\$ 9=		OR	X\$18=		
INE	DEPENDENT C	LAIMS	3 minus 3 =		* 0			X43=		OR	X86=		
ML	ILTIPLE DEPEI	NDENT CLAIM P					+145=		OR	+290=			
* If	the difference	e in column 1 is	less than ze	ero, enter	"0" in c	olumn 2	L	TOTAL		OR	TOTAL	770	
CLAIMS AS AMENDED - PART II											OTHER	THAN	
		(Column 1)		(Colun		(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER OUSLY	PRESENT* EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	-	OR	X\$18=		
	Independent	* ENTATION OF MI	Minus	***	CLAINA	=		X43=		OR	X86=	·	
	FINST PRESE	ENTATION OF MI	DETIFLE DEF	ENDENT	CLANVI			+145=		OR	+290=		
								TOTAL		OR	TOTAL		
		(Column 1)		(Colum	nn 2)	(Column 3)	А	DDIT. FEE		] -	ADDIT. FEE		
		CLAIMS		HIGH	EST	(Goranni o)	lr	<u></u> 1	ADDI-	•		ADDI-	
AMENDMENT B		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	* NTATION OF MU	Minus	ENDENT	CL AINA	= '		X43=		OR	X86=		
	ring i Friese	INTATION OF INC	LIPLE DEP	ENDENT	CLAIM	<u></u>	' [	+145=		OR	+290=		
<b></b>								TOTAL		OR .	TOTAL ADDIT. FEE		
ADDIT FEE (Column 1) (Column 2) (Column 3)										•	ADDII. FEE		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT • EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		<u> </u>	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR			
# 16 the enterin polyment in the stand the set of the s										OR	+290=		
**	f the "Highest Nu	mber Previously Pa	id For IN THIS	SPACE is	less than	20, enter "20."	. <u>—</u>	TOTAL DDIT. FEE	·	OR ,	TOTAL DDIT. FEE		
		mber Previously Pa ber Previously Paid							ropriate box				